## PART B -FEE(S) TRANSMITTAL

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

MARSHALL, GERSTEIN & BORUN LLP 233 S. Wacker Drive 6300 Willis Tower Chicago, Illinois 60606-6357

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR			ATTORNEY DOCKET NO. CONFIRMATION NO		CONFIRMATION NO.
10/517,047	07/27/2005		Gabrie	el Montaldo	28944/40701 2848		2848
TITLE OF INVENTIO	N: METHOD OF G	ENERATING	A PREDETE	ERMINED WAVE FIELD			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE		DATE DUE
Non-Provisional	no	\$1,510.00		\$300.00	\$1,819.00		11/19/2010
EXAMINER		ART UNIT		CLASS-SUBCLASS			
K. L. Fe	3768						
Address" (37 CFR 1.36 Change of cor	dence address or indication 3).  respondence address (or Address form PTO/SB/I	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member 2					
"Fee Address" i		d attorney or agent) and the					
form PTO/SB/4	7; Rev 03-02 or more rec ner Number is required	ent) attached.		istered patent attorneys or ag ed, no name will be printed.	ents. If no 3		
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
SUPER SONIC IMAGINE, AIX-EN-PROVENCE, FRANCE							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual X Corporation or other private group entity Government							
4a. The following fee(s)	) are enclosed:		4b.	Payment of Fee(s):		***************************************	And the second s
X Issue Fee A check in the amount of the fee(s) is enclosed.							
x Publication Fee (No small entity discount permitted) x Payment by credit card.							
X Advance Order -# of Copies 3 X The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to							
L				sit Account Number	13-2855	·	n create any overpayment, to
5. Change in Entity St	atus (from status indicate	ed above)		1		***************************************	
a. Applicant clai	ims SMALL ENTITY sta	itus. See 37 CF	R)1.27.	b. Applicant is no longer	claiming SMAI	LL ENTITY sta	atus. See 37 CFR 1.27(g)(2).
The Director of the USPTC NOTE: The Issue Fee and interest as shown by the rec	Publication Fee (if require	d) will not be ac	ccepted/from a	(if any) or to re-apply any pre- anyone other than the applicar	viously paid issue nt; a registered att	fee to the appli- corney or agent;	cation identified above. or the assignee or other party in
Authorized Signatur	re <i>4</i>				Date _	Nov	ember 16, 2010
Typed or printed na	me	David	C Read		Registra	tion No	39.811